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STRATEGY RESEARCH PROJECT

THE GRIEF IMPACT ON SOLDIER MORALE DURING EXTENDED DEPLOYMENTS

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BY

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THE GRIEF IMPACT ON SOLDIER MORALE DURING EXTENDED DEPLOYMENTS

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ABSTRACT

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Soldier morale is a key issue and concern in the military environment. This is especially true in the post-Gulf war era because of the frequency of soldier deployments. Attention to and maintenance of soldier morale is critical to sustain quality soldier performance and survivability, and consequently, successful mission accomplishment. This study explores the fluctuation of morale over time and the impact of loss and grief on this fluctuation. It argues that grief has a significant bearing on soldier morale during extended deployments and if not recognized and dealt with effectively will result in adverse soldier performance. The paper connects the major theories of loss and the process of grief to the traditional concepts of soldier morale.

INTRODUCTION

The end of the cold war has propelled the United States into an epistomological vacuum regarding the military involvement in the world. The cold war scenario provided the framework for the function of the military within the just war tradition. The use of the United States military was tied primarily to deterrence and self-defense. However, since the end of the cold war, the military has been increasingly used for a variety of humanitarian and peacekeeping causes. Charles Moskos, a distinguished student of such matters, says that there have been at least twenty (20) "peacekeeping" or noncombat efforts by the United States around the world since the end of the Gulf War.¹ General Powell confirms that "peacekeeping and humanitarian operations are a given."²

Soldier morale is historically an issue and concern of military leadership. It is seen as a major factor in the successful accomplishment of any military mission. Given the new order thinking concerning the use of military forces and the increased frequency of soldier deployments, this writer contends that soldier morale is vital to the command for the successful completion of extended military operations. Soldier morale is vital because of its connection with extended soldier deployments, loss, the grieving process, and successful mission accomplishment.

It is this writer's thesis that grief is a significant impact on soldier morale during extended deployments. If this grief is not recognized and dealt with effectively it will have a

negative impact on soldier performance and perhaps, even survivability. In either case, successful mission accomplishment is impacted.

This paper will examine the importance of soldier morale in the military environment; describe four periods of crisis during a process that represents a "morale curve"; describe the impact of loss and grief on soldier morale by explaining the psychological reactions during critical periods; and suggesting some therapeutic interventions for prevention and treatment.

MORALE

The subject of morale is generally neglected in professional literature.³ Additionally, there is limited study or research on the topic, particularly regarding extended deployments of soldiers. John Baynes, in his book, Morale: A Study of Men and Courage, suggests that many writers have given considerable attention to the enormity of war, tactics, strategy, and resources, but few have sought to consider soldiers minds and spirits. He quotes John Connell as saying that "the soul of man, in all its majesty and mystery, has been dwarfed by the war game."⁴

Napoleon Bonaparte, however, considered morale to be so significant that he weighed it three-to-one over material or physical factors.⁵ Francis Steakel seems to agree. His research leads him to conclude that a soldier's ability to fight effectively is derived from more than his skills and martial

knowledge. A soldier must possess the discipline to follow orders, confidence in himself and peers, and a prevailing spirit which sustains him. Steakel affirms that morale is the key indicator. General George C. Marshall said, "It is not enough to fight. It is the spirit which we bring to the fight that decides the issue. It is morale that wins the victory."

Joe Simmons echoes Marshall's belief. In his book, Winning Wars, he indicates that the number of soldiers and quality of weapons systems are important in winning war. He adds, however, that the "essence of military victory rest on more intangible factors."8 These factors include a soldier's will, spirit, and morale. Simmons asserts that Belgium, Holland, and France surrendered during World War II because they lacked these intangible factors.9 Robert White, in his document, "Mobilization Morale, and Combat Success in the US Navy," calls morale a "basic and foremost element of success" in military engagements. He further adds that it is an indispensable foundation for military survival and victory. 10 Thus, attention to and maintenance of soldier morale must be esteemed of vital significance in peace time and during war. "The truth is," states Baynes, "that a brilliant plan of battle in the tactical sense can be a complete failure if morale is bad, while a poor plan can be made to work well if morale is good."11

Morale, despite professional neglect, is a commonly used term. It is mentioned in business, industry, athletics, other organizational groups, and especially in the military. Though morale, high or low, is generally easily recognized, it is somewhat difficult to define. Consequently, there is not a precise definition. Most writers, however, use similar terms in their attempts to define it. Commonly used ideas include: "rational and emotional attitudes," "barometer of mental health and the capacity for suitable responses," "a state of mind," "a condition or spirit" which holds together a person or body of persons, and "the prevailing temper or spirit of a group or individual." Each of the expressed ideas have validity. For the purposes of this paper, Steckel's definition is used. He defines morale as "the rational and emotional attitudes that motivate and sustain soldier(s)." This definition includes such elements as discipline, confidence, enthusiasm, courage, cheerfulness, steadfastness, hope, zeal, loyalty, and esprit de corps.

There are also an infinite number of variables which military leaders, psychologists, and historians maintain have an impact on morale. These varibles include such factors as training, equipment, food, mail, belief in a cause, information, discipline, conspicuousness, leadership, the mission, and a sense of hope. Each certainly has a profound impact on soldier morale and to neglect any of them will likely result in negative consequences. Yet, there is another element associated with morale which is not generally understood and thus, inadequately addressed or totally ignored. It is the challenge of coping with change.

Change is a constant part of life. Everyone faces the

continuing challenge to cope with change. Change tests one's adaptive capabilities as it forces comparison of new life situations with previous experiences. Change can be the result of a voluntary decision or imposed by external factors. Soldiers experience a significant amount of change which is externally imposed, especially during extended deployments. John Schneider, in his book, Stress, Loss, & Grief, suggests that change is a source of stress related to loss. Stress is experienced in every change event. It is easily observed in major life events such as divorce, rape, or death, but is just as prevalent in other events such as promotions, marriages, graduations, births, moving, Christmas, and life's developmental stages, especially adolescence. Extended soldier deployments can also be added to this list. The impact of change on soldier morale can best be observed with the aid of the "morale curve."

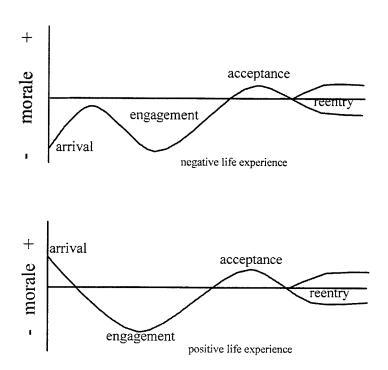
MORALE CURVE

Psychologists and psychiatrists, for several years now, have identified phases or stages which are common when persons experience change. Parkes' and Weiss' work on loss (1983), Atchley's work on retirement (1976), Kubler-Ross' work on death and dying (1969), and Horowitz's work on traumatic events (1983) and stress (1986) provide numerous examples of these stages.

W.W. Menninger, of "The Menninger Foundation," suggests that there are predictable responses to life changes which can be characterized by four periods of crises/stages. These crises

represent a "morale curve." Baynes indicates that "morale is concerned with the way in which people react to the conditions of their existence." This is observed in the morale curve stages.

The four crises/stages of the morale curve are: 1) arrival,
2) engagement, 3) acceptance, and 4) reentry. Evidence,
according to Menninger, indicates that the length of each stage
depends on the duration of the new life event. It applies to a
5-day seminar, 6-week summer camp, 3-month tour in Somalia, 1year tour in Korea, 2-year Peace Corps commitment, or a 4-year
college enrollment. The following graphs depict the morale curve
responses to negative and positive life experiences. 16



The crisis of "arrival" occurs near the event's beginning

and can last for a day(s), week(s), or month(s) depending on the duration of the event. The challenge in this stage is to keep one's bearings. The emotional responses may vary from enthusiasm and excitement, to anxiety, apprehension, denial, or shock depending on whether it is a positive or negative life event. Whether the change event is the result of voluntary or external actions, there is generally a degree of anxiety and apprehension about one's ability to handle it. In addition to these reactions, this author experienced, and witnessed it in countless others, information overload at the onset of a short tour in Korea. The results of a study of Peace Corps Volunteers indicate that during this initial period some volunteers were overwhelmed with intolerable levels of anxiety. This resulted in their termination of duty and eventual return to the United States. 17

Sociologist Peter Marris framed the response to this initial crisis in this manner:

"Since our ability to cope with life depends on making sense of what happens to us, anything which threatens to invalidate our conceptual structures of interpretation is profoundly disruptive...The impulses of conservatism—to ignore or avoid events which do not match our understanding, to control deviation from expected behavior, to isolate innovation and sustain the segregation of different aspects of life—are all means to defend our ability to make sense of life." 18

The second stage is the crisis of "engagement." It is during this stage that one acknowledges the new life event and realizes the reality of it. It is generally the time of acknowledging losses, unrealized expectations of accomplishment, and loss of freedom to safely express frustrations. Morale tends

to drop considerably during this stage. The predominate emotions are depression, despair, discouragement, hopelessness, and frustration. One author adds to this list of characteristics by stating that low morale is manifested by apathy, perplexity and indecision; lack of strenuous resolution; sluggishness; disorganized actions; distrust and dissension; and grumbling, anxiety, and pessimism.¹⁹

The crisis of "acceptance", the third stage, occurs somewhere during the middle of the change event. It represents a heightened morale resulting from increased knowledge, familiarity, and mastery of the new life event. A new sense of equilibrium is established. One becomes a part of the new reality, and a new sense of self emerges. The people/things left behind become a part of the past, and the new life event becomes the present reality.

Finally, there is the crisis of "reentry". This crisis occurs only when there is a clear conclusion of the new life event, such as a one year tour in Korea. The emotional responses are similar to those experienced during the first stage as one goes through separation anxieties and anticipates the next life event. The reunion period, following extended separation, can be exciting. However, it can also be a period of stressful adjustment for couples and families. The goals of this stage are to limit damage caused by the separation, ease the strain of entering each others new reality, and preserve the positive personal gains each may have experienced during the separation.

The morale curve stages are magnificently illustrated by Stafford-Clark in his description of the patterns of flight crew morale during their 30-sortie tours in World War II:

"Immediately after beginning a tour there is a perceptible rise in morale; this is due to the feeling of accomplishment and maturity now that the long months of training are left behind, and to the novelty, excitement and interest of this final stage of experience and adventure. By about the fifth sortie this surge in morale has begun to give place to the recognition ... of formidable reality of the tour. This tends to continue, in some cases almost subconsciously, until by the twelfth or fifteenth sortie the man has reached the stage in which the full realization of the danger and unpleasantness of the job has been forced upon him while there stretches in front of him an ominously large succession of repeated sorties before he can achieve the honorable completion of his tour. Indeed, while seeming more desirable than ever before, this (completion of the tour of 30-sorties) now appears so remote as to be an unprofitable and almost impractical goal on which to pin his hopes. At this point his chances of survival are bound to occupy his mind to a greater or less extent, depending upon his commitments, domestic situation, and temperament, and at this time they must appear at their lowest ebb.

...As his total of completed sorties mounts up (if he survives), the end of his tour gradually comes into the sphere of his permitted expectation and the average aircrew member looks forward to this with unconcealed eagerness...As this prospect increases and his wisdom, experience and confidence deepen, his morale rises steadily."

LOSS AND GRIEF IMPACT ON MORALE

As noted above, there are a significant number of factors which influence soldier morale. Particular emphases has been given to the challenge of coping with change. Specific focus is now directed toward the impact of grief resulting from loss. This loss is associated with change that effects morale so dramatically.

Loss is experienced in many ways. There are losses of personal property, relationships, childhood, physical strength, health, and income to identify only a few. Alan Wolfelt, in his bood, "Death and Grief," divides loss into four categories: 1) significant others, 2) parts of self, 3) external objects, and 4) developmental.²¹

The loss of a significant other through death is often the most intense form of loss. There are, however, several other significant losses we frequently experience. Separation, divorce, and permanent change of station are a few examples. These may involve the end of opportunities to relate to, talk with, touch, argue with, share joy with, and otherwise be in the emotional and physical presence of a particular person.

There is also the loss of some aspect of self. These losses can overlap with significant other losses as we tend to define ourselfs in relationship to others. Examples of losses in this arena include: loss of dreams and hope; loss of health, through accident, sickness, or aging; loss of role, such as being a spouse or employee; and loss of self-esteem.

Dr. Wolfelt discusses the loss of external objects as a third category. Hurricane Andrew, in 1991, left a trail of devastation and destruction in the middle of Florida. Many people lost their homes and all their worldly possessions. This is an example of extreme external loss. Not as extreme, but nonetheless significant, is the loss of possessions felt by soldiers during deployments and short tours.

The final category of loss in this scheme is developmental loss. Loss is experienced from the moment of birth until death. Consequently, life is a series of developmental losses.

Developmental losses, according to Wolfelt, are those losses which occur in the normal process of human development.²²

These natural human developmental losses share the following characteristics: "1) they are the result of the process of development, growth, and aging; 2) they may not have an external event associated with them; and 3) they involve in some way the challenging of previously held, developmentally appropriate beliefs and assumptions." Types of developmental losses include the weaning of an infant, walking, talking, starting school, graduation, marriage, birth of a child, the empty nest, and retirement. Loss is experienced through each phase of developmental movement. Many of these losses are commonly recognized by society, and grieving is encouraged. More frequently, however, the loss is not recognized as such, and opportunities for grieving are not provided. As a result, many developmentally related losses are difficult to resolve and the impact is carried into the next developmental stage.

In contrast to Wolfelt, Therese Rando, author of <u>Grief</u>,

<u>Dying</u>, and <u>Death</u>, divides loss into only two categories: 1)

physical (tangible), and 2) symbolic (psychosocial).²⁴

Schneider chooses three categories for his distinctions of loss:

1) relationships, 2) external objects, and 3) environmental.²⁵

However one categorizes loss, it touches all soldiers and is

associated with all the changes taking place in the course of their lives.

Loss impacts on every part of a soldier's being. It disrupts emotional well-being, is a significant factor in physical health, drains on intellectual capacities, influences behavior and effects their spirituality.²⁶

Studies indicate that loss is a significant stressor on one's physical health. It is a threat to the body's sense of homeostasis: "the tendency of any set of relationships to strive perpetually, in self-corrective ways, to preserve the organizing principles of its existence." Consequently, there is a physiological and biochemical reaction associated with loss. Hans Selye describes it as the "alarm reaction" which mobilizes the body for change. 28

The physical impact to loss, especially unresolved loss, may be as simple as experiencing exhaustion, difficulty in sleeping, tightness in one's throat, or a loss of energy. More severe reactions include cancer, coronary heart disease, tumors, ulcerative colitis, rheumatoid arthritis, asthma, hyperthyroidism, effects on the immune system, and alteration of corticosteroid levels. Soldiers experiencing loss tend to be more susceptible to sickness and disease, injury, and even more vulnerable to death.²⁹

The intellectual impact of loss leads many persons to become behaviorally rigid or controlling to avoid future loss. There is also a tendency towards polyphasic, and either convergent or

divergent thinking. Some people experience a general lack of motivation to expand their functions and a general dullness and obtuseness sets in. Depression and other forms of mental illness are also common affects of loss. Infact, some give up and resort to drugs, alcohol, or suicide.

The emotional effects of loss are generally more varied and noticeable than the other impacts. Some of the emotions experienced vary from numbness, fear, quilt, loneliness, and anxiety, to anger, rage, confusion, depression, helplessness, and hopelessness.

There is also a significant spiritual dimension associated with loss. A prominent aspect of spirituality is the imaginative capacity. This capacity, for persons in grief, is usually overshadowed by loss. One's zest for life is often diminished by loss. Daily routines are seen as meaningless and trivial. Some are robbed of their joy and appreciation for life. Others turn away from their search for meaning and purpose. Loss often dulls one's belief in the goodness and the providential care of God.

Finally, there are many behavioral impacts of loss, manifested in a number of ways. Some include: detachment, disorientation, pre-occupation, possessiveness, moodiness, competitiveness, aggression, eating disorders, personality changes, and depression. Grief is the most normal reaction to each of these catagories of loss.

Repeatedly, soldiers are confronted with loss and to a greater or lesser degree the process of grief occurs in reaction

to each loss.³¹ Yet, it is a normal reaction in the patterns of life. It is not only not unusual, it is "as normal as winter in the round of the seasons, as normal as storms in the pattern of weather, as normal as nighttime as a part of the twenty-four hour day, as normal as tragedy in the full scope of drama."³²

Grief is defined as "the process of psychological, social, and somatic reactions to the perception of loss." Since grief is a process, it is not tied to a specific emotion like fear or sadness, but is a constellation of many feelings, thoughts, and behaviors. Wolfelt suggests that grief "is the internal meaning given to the external event." Grieving is the process that allows one to let go of that which was and be ready for that which is to come.

This definition and understanding of grief is based upon several assumptions which are not easily documented. The assumptions can be, however, assumed accurate and relevant based upon the work of countless psychologists and psychiatrists over the past decades. Rando and Schneider offer the following assumptions:

- 1. Grief is manifested in the psychological, somatic, and social realms of a person's life. It is a holistic process.
- 2. Grief is a continuing development involving many changes.
- 3. Grief is a natural, expectable reaction to loss.
- 4. Grief is based upon the unique, individualistic perception of loss by the griever.
- 5. Grief is a natural, normal healing process.
- 6. The way in which people have dealt with earlier losses will be a major factor in

their initial response to loss.

- 7. The loss of any significant attachment is viewed by the individual as a threat to other significant attachments.
- 8. Significant release of energy bound to the loss is not accomplished until the griever concludes the grief process.
- 9. The process of abstracting what is important about the loss involves reformulating and reframing the context meaning of the loss.
- 10. Early stages or periods of grieving are a matter of alternately expanding and contracting the griever's awareness of the significance of his or her loss.³⁵

Psychologists and psychiatrists, for many years, have identified phases, stages, reactions, or manifestations which are common to persons in the grieving process. There are numerous theories and conceptualizations of the grief process. Each theory may have different names and focus on a variety of topics, but they all entail loss, and address the same basic feelings. It is also important to understand that the "stages" or "phases" are not generally sequential in nature. The grieving process is not rigid but more fluid in its evolution. The griever will probably move back and forth among the phases until the resolution of the loss finally takes place.

Erich Lindeman, the pioneer in grief investigation, described three stages of grief (1944): 1) Shock and Disbelief: the inability to accept the reality of loss, 2) Acute Morning: the acceptance of loss, weeping, loneliness, and disinterest in daily affairs, and 3) Resolution: gradual reentry into daily activities and reduction of preoccupation with the loss.

Simularly, J. Bowlby (1961) and Parkes (1974) differentiated

four main phases of the grief process: 1) Phase of Numbness: a stage of being stunned, with some denial of the loss, 2) Phase of Yearning and Searching: a stage of trying to recover and reunite with the loss, 3) Phase of Disorganization and Despair: characterized by depression and loss of purpose, and 4) Phase of Reorganization: attachments to the loss are broken and new ties and interests are established.

Likewise, G. Engel identified six phases in his understanding of grief (1964): 1) Shock and Disbelief: stunned and numbed, 2) Developing Awareness: anger, quilt, and impulsive acting-out behavior, 3) Restitution: work of mourning, 4) Resolving the Loss: attempts are made to deal with void, 5) Idealization: negative and hostile feelings towards the loss are repressed, and 6) The Outcome: successful healing is characterized by ability to realistically remember pleasures and disappointments of the loss.

In other studies, Kubler-Ross outlined five stages of the grief process (1969): 1) Denial, 2) Anger, 3) Bargaining, 4) Depression, and 5) Acceptance.

Finally, Ramsey lists the five phases of the grief process in his theory as: 1) Shock, 2) Denial, 3) Despair, 4)

Acceptance, and 5) Resolution.³⁶

In more detail, John Schneider provides some explanations of the various phases of grief in his book, <u>Stress, Loss, and Grief</u>. He suggests that there are seven discernable manifestations of the grief process:

- 1. Initial Awareness: The reality of loss becomes a conscious awareness. It is generally experienced as shock accompanied by a disruption of daily activities and the capacity to function. Emotions generally associated with this stage include confusion, rage, and numbness.
- 2. Attempts to Limit Awareness: This involves the defensive and adaptive behaviors of trying to prevent, overcome, or reverse the loss. Attempts at diminishing the true significance of the loss might also occur during this phase. Emotions often experienced during this phase include yearning, anger, guilt, anxiety, loneliness, shame, and disgust.
- 3. Awareness: The reality of loss is acknowledged; it cannot be recovered nor denied. A sense of helplessness, hopelessness, and deprivation are common experiences. This phase often effects a person's will to live, emotional health, and physical endurance. The typical emotions of this stage are sadness, loneliness, helplessness, and hopelessness.
- 4. Gaining Perspective: Persons tend to terminate their grief in three ways: 1) return to strategies of limiting awareness; 2) going through a process of healing and acceptance; and 3) reinvestment of energies in the living of life. Reminiscence, sweet sadness, vulnerability and softening of feelings are typical emotional responses during this period.
- 5. Resolving Loss: This involves the process of detaching from those aspects of the loss that are now over and no longer have a function. The resolution phase brings on emotions such as determination, peacefulness, anger, sadness, and quilt.
- 6. Reformulating Loss: Energy that was bound to the loss is now freed for new realities. Focus changes from coping to growth, from problems to challenges, and from limits to potential. The emotional response here is characterized by patience, joy, curiosity, and diminished anxiety.

7. Transforming Loss: Loss is placed in a context of growth, and the extent and limits of what was lost are integrated into the new life reality. Grief is viewed as a unifying rather than alienating life experience. The emotional response is one of energy transformation and neutrality.³⁷

This writer prefers the phases listed by Therese Rando in her book. She outlines three phases in the grief process: 1) avoidance, 2) confrontation, and 3) reestablishment. The avoidance phase is generally characterized by shock, denial, and disbelief. During this phase there is the attempt to avoid an acknowledgement of the loss. Just as the human body goes into shock as the result of physical injury in order to subdue the pain, so too the human psyche goes into shock as a natural reaction to loss for the same reason. The reaction is often characterized as a feeling of numbness.

As shock and numbness begin to subside and recognition of loss takes hold, denial may follow. Denial is therapeutic in serveing as a buffer allowing the griever to absorb the reality of the loss gradually. Rando refers to denial as an "emotional anesthesia." Other aspects of the avoidance phase include disbelief and perhaps a need to know why the loss occurred. Confusion and disorganization may also occur during this period.

The second manifestation of grief, according to Rando, is the confrontation phase. This phase is an highly emotional phase. Shock and disbelief have lessened their psychological grip and the extremes of the human affect are now released. Feelings of fear, anxiety, sadness, anguish, despair, and

depression are common during this period.

The realization of unusual behavior and feelings is often unsettling and tends to make the experience more frightening.

Apprehension of the unknown and unfamiliar can lead to a sense of anxiety and perhaps panic. Distress associated with memories of earlier losses often heighten the emotional and psychological arousal serving to intensify the loss experience.

Two of the more common and most difficult to handle emotions experienced during the confrontational phase are anger and guilt. Anger is usually to be expected as a natural response to loss. It is often displaced onto other people. The army, a certain non-commissioned officer, God, a doctor, a chaplain, a person who died, and the griever himself may be the object of vented anger. Grievers often have a sense of injustice and disillusionment, feeling that they have lived by the rules and done their part but now have been cheated.

Guilt is also a normal and expectable aspect of the grief process. This is particularly true in the circumstance of divorce or death. Relationships are filled with positives and negatives which give birth to guilt making it a natural concomitant to the loss of another. The griever may feel guilt for still being alive, for not doing more to prevent the death, or for not living up to unrealistic or others expectations. Sometimes guilt accompanies the sense of relief that a griever may experience. This is especially true when there has been suffering or a long drawn-out illness for a deceased.

Rando describes reestablishment as the final phase of the grief process. Reestablishment begins with the decline of grief and the beginning of an emotional and social reentry into the real world. The person develops a new sense of self minus the loss. The loss is not forgotten, but emotional energy tied up in the loss is now reinvested in new life experiences. This process does not happen all at once, but is more of an ebb and flow experience.

Guilt is often experienced during the reestablishment phase as the griever realizes that he continues to live despite the loss. This enjoyment of life may still be connected to a sense of betrayal towards the object of loss.

We have now examined the basic dynamics of the morale curve and the process of grieving. When the grief process is integrated into Menninger's concept of the "morale curve" the learning can be significant. Restated, Menninger's research concludes that there are four predictable stages in morale in response to life changes: the crises of arrival, engagement, acceptance, and reentry. We have briefly discussed each in this paper. The first two, especially the crisis of engagement, are of significance for commanders and unit ministry teams in dealing with deployed soldiers.

The crisis of "arrival" occurs near the beginning of deployment and can last for a day(s), week(s), or month(s) depending on the duration of the deployment and the individual soldier. The challenge in this stage is to keep one's bearings.

The emotional responses vary from enthusiasm and excitement to anxiety, apprehension or denial depending on whether it is a positive or negative life event.

The second stage is the crisis of "engagement." It is during this stage that one acknowledges the new life event and realizes the reality of it. It is generally the time of acknowledging losses. Soldier morale tends to drop considerably during this stage. The predominate emotions are those of depression, despair, discouragement, hopelessness, and frustration. It was during this period, while serving a one year tour in Korea, that this writer observed soldiers become depressed, less effective in job performance, physically ill, go AWOL, get into traffic accidents, drink alcohol excessively, and/or become involved sexually with locals. This writer attributes the much of the crisis of "engagement" to the grieving process and particularly to a failure to deal effectively with grief resulting from loss.

TASKS OF GRIEVING

To completely understand the experience of the grief process it is necessary for soldiers to know and do the tasks of grief. There are three basic tasks to be accomplished for a soldier to work through the grief process according to Parkes and Weiss. 40 First, there must be intellectual recognition and explanation of the loss. Soldiers must develop realistic answers concerning the loss. Without these answers, soldiers will continue to feel

anxious about the threat of further loss.

Emotional acceptance of the loss is a second task to be accomplished during the grief process. This is the point where reminders of the loss are no longer too painful to face. This happens as a process over time with repeated confrontations of the loss.

The final task of the grief process is the assumption of a new identity. This is a process of developing a new identity that reflects and accepts the new circumstances. This is often a slow process, and at times a soldier may forget his new identity acting as though the loss has not occurred. In the case of the death of a significant other, it is the movement from a relationship of presence to a relationship of memory. It is "untying the ties that bind." The deceased is not forgotten, but emotional energy is redirected towards others. This is called "decathexis," the detailing and modifying emotional ties so that new relationships can be established. It should be stressed that this is not an easy process.

THERAPEUTIC INTERVENTIONS

To help grieving soldiers accomplish these tasks of grief work, the chain of command and the unit ministry team can intervene in many ways. There are several interventions which can be used to facilitate the process of grief work. Some of these strategies include, but are not limited to the following:

^{*}Make contact and assess.

^{*}Reach out to the grieving soldier.

- *Be present physically, as well as emotionally, to render the griever security and support.
- *Make sure to give the griever permission to grieve.
- *Do not allow the griever to remain isolated.
- *Remember that no one can take away the pain of the griever.
- *Do not let a sense of helplessness keep you from reaching out to the griever.
- *Expect to have to tolerate volatile reactions from the griever.
- *Recognize the critical therapeutic value of "the gift of presence".
- *View the loss from the griever's unique perspective.
- *Let your genuine concern and caring show.
- *Do not try to explain the loss in religious or philosophical terms to early.
- *Do not try to unrealistically "pretty up" the situation.
- *Give hope and encouragement that the griever will successfully complete the tasks of grieving and the pain will subside.
- *Encourage verbalization of feelings and recollection of the loss.
- *Help the griever to recognize, actualize, and accept the loss.
- *Listen nonjudgmentally and with permissiveness and acceptance.
- *Allow the griever to cry, talk, and review.
- *Do not be afraid to mention the loss to the griever.
- *Help the griever identify and resolve secondary losses and unfinished business.
- *Work with the griever to reinvest in a new life. 41

CONCLUSION

An army survey of casualties during World War II revealed that there were two periods of increased injuries and deaths.

One was at the beginning of a soldier's tour and the other was at four months or longer into the tour. The survey concluded that during the first period soldiers were inexperienced and during the second soldiers became discouraged, morale went down, and

casualties went up. This writer suggests that the soldiers in the second period, those with low morale, were experiencing the crisis of "engagement" and had low morale as a direct impact of the grieving process. It is also this writer's contention that these crises can be easily observed in soldiers during any extended deployment.

Studies indicate that persons who have some sense of cognitive control over new life events handle the stress of change better. And therefore, in addition to preparing soldiers with training, equipment, shots, and etc., providing them with training on the morale curve and the grief process, making known the unknown of emotional responses to change, will reduce the sense of helplessness often experienced on extended deployments. The conclusions and recommendations stated in the Summary Report of the Gander Military Air Disaster of 1985 also reference the need for grief training. These recommendations included the development of formal grief classes at all appropriate leadership training courses to include the Sergeants Major Academy, First Sergeant Courses, and the Medical and Chaplain schools. They also recommended that soldiers receive grief management training at the company level.

This writer believes that training on grief and dealing with change will help prevent the extreme downward dive in soldier morale upon deployment for extended tours. It will also alert and remind commanders of the critical times when soldier morale tends to fall. This information will also help commanders

determine when to provide grief intervention strategies, rest and relaxation, or call for a rotation of troops. Adoption of these recommendations can make the difference in soldier performance and/or survivability, and contribute directly to successful mission accomplishment.

APPENDIX A

MORALE AND GRIEF MANAGEMENT CLASS

I. MORALE

A. Definition

- 1. "A prevailing temper or spirit, in the individuals forming a group, which is marked by confidence in the group, group loyalty, and readiness to strive for group goals." (English & English)
- 2. "The barometer of the individual's and the community's capacity for suitable response to the call of duty and of the fortitude and tenacity displayed in the response."

 (Perk)

B. MORALE CURVE

- 1. Exercise: Allow participants to draw a graph of their estimation of the morale curve over a twelve (12) month period. (Provide blank morale curve graph sheets).
- 2. Show slide of completed morale curve, and explain and discuss each of the four stages and their impact on soldiers and family members.

II. GRIEF MANAGEMENT

- A. Grief is the normal reaction to loss.
 - 1. Discuss the four categories of loss.
 - a. Significant others
 - b. Parts of self
 - c. External objects

- d. Developmental
- 2. Explain the impact of loss on one's physical health, intellect, emotions, spirituality, and behavior.

3. Exercise

- a. Ask participants to respond to the following: Think about a loss in your life; When did it occur?; Who was involved?; What happened?; How did you respond?; What do you remember someone doing or saying that seemed to help most?
- b. Divide participants into groups of three or four to share their responses.
 - B. Grief is the normal reaction to loss.
 - 1. Define grief.
 - 2. Discuss the grief phases.
 - 3. Explain the tasks related to the grief process.
 - 4. Present and discuss interventions for grief.

III. CLOSURE AND EVALUATION

- A. Discuss any remaining issues. Allow participants to share feelings or thoughts that the class generated.
- B. Evaluation: Ask participants to provide a written evaluation concerning the class and it usefulness.

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